

PRIVACY ACT STATEMENT: AUTHORITY 5 U.S.C. 301 & 44 U.S.C. 3101 (Executive Order 9397) SSN
PRINCIPAL PURPOSE (S): This request for your private information, including social security number and personal history information, is made to assist our office in determining eligibility for services, compliance with state and federal law, and related purposes.

ROUTINE USE (S): Information provided is used to assign personnel to housing, perform necessary background checks, and for other lawful purposes.

MANDATORY/VOLUNTARY DISCLOSURE CONSEQUENCES OF REFUSAL TO DISCLOSE: Disclosure of SSN and personal historical information is voluntary and there will be no adverse consequence from refusal to disclose. However, refusal to establish eligibility may preclude assignment to housing.

ADDENDUM TO HOUSING APPLICATION FORM DD 1746

Have you, or any member of your family for whom you seek authorized housing under this application, ever been charged with, convicted of, or pleaded no contest to any criminal charge related to a sexual offense?

YES NO (CIRCLE ONE)

Have you, or any member of your family for whom you seek authorized housing under this application, ever been required to register as a sex offender under the laws of the United States or any state?

YES NO (CIRCLE ONE)

Is any member of your family for whom you seek authorized housing under this application, a registered sex offender?

YES NO (CIRCLE ONE)

If you answered "Yes" to any of the above questions, please list the dates, locations, violations & resolution. Provide all details of any requirements to register as a sex offender. Use reverse side of this page, if necessary.

CERTIFICATION OF APPLICANT

I hereby certify that all responses contained herein are true and correct, and I understand that the omission of any material fact may result in denial of my application for housing, or eviction from housing if the omission is discovered after assignment.

Printed Name: _____

Signature: _____ Date: _____